

**REFUGEE HEALTH ASSESSMENT PROGRAM
SUPPLEMENTAL TESTING and PHARMACEUTICAL PROTOCOLS
JULY, 2000**

Supplemental Testing Protocol:

When ordering tests, clinicians are expected to document in the patient's medical record the specific criteria used to justify ordering the test. RHAP annual site visits may include assessment of adherence with supplemental testing protocol criteria. Clinicians may not order any supplemental test for patients who do not meet specific criteria. Supplemental tests are not to be used for screening of patients originating from particular regions but should be ordered only as indicated for individual patients' specific medical needs.

Procedure Code	Description	Criteria
<i>Sexually transmitted diseases: clinicians are expected to comply with DPH regulations regarding reportable diseases (from 105 CMR: 300).</i>		
86592	Syphilis test, qualitative, e.g. RPR	Painless chancre/s, characteristic rash involving palms or soles, condyloma latum, gummatous changes, symptoms of neurosyphilis, aortitis, non-specific signs or symptoms suggestive of syphilis, or contact with a person known to have syphilis; presence of risk factors, including inconsistent use of barrier contraception, new or > one sex partner in past 3 months, new partner since last tested, or infected with other STD
87163	Gonococcus Culture	Penile discharge, pyuria, unusual vaginal discharge, pelvic or abdominal pain suggestive of PID, symptoms of disseminated gonococcal disease, contact with a person infected with Gonococcus; men with urinalysis positive for leukocyte esterase or ≥ 10 PMNs in spun sediment of first voided urine; presence of risk factors, including inconsistent use of barrier contraception, new or > one sex partner in past 3 months, new partner since last tested, or infected with other STD
87490	Chlamydia, by direct DNA probe ("genprobe")*	Penile discharge, pyuria, unusual vaginal discharge, pelvic or abdominal pain suggestive of PID, contact with a person infected with Chlamydia; men with urinalysis positive for leukocyte esterase or ≥ 10 PMNs in spun sediment of first

		voided urine; presence of risk factors, including inconsistent use of barrier contraception, new or > one sex partner in past 3 months, new partner since last tested, or infected with other STD
87491	Chlamydia, amplified DNA probe (urine ligase chain reaction)*	As above.
87590	Gonococcus, by direct DNA probe (“genprobe”)	As above.
*Chlamydia testing by direct urethral/cervical/vaginal swab or urine sampling is permitted. Clinicians should use the test most appropriate for the suspected site of infection with consideration of the cultural issues involved with genital examination.		

<i>Parasitic diseases</i>		
<i>Note: Clinicians who are unfamiliar with the diagnosis and treatment of tropical or parasitic diseases should consider obtaining consultation from an infectious disease specialist before ordering supplemental tests. Clinicians are expected to comply with DPH regulations regarding reportable diseases (from 105 CMR:300).</i>		
86682	Strongyloides titers (unspecified helminth antibodies)	Unexplained eosinophilia on peripheral blood counts
86682	Schistosoma titers (unspecified helminth antibodies)	Unexplained eosinophilia on peripheral blood counts, hematuria, or hepatosplenomegaly in a patient from endemic regions
86750	Malaria (plasmodium) antibody titers	For testing of patients from malaria-endemic regions with suspected tropical splenomegaly syndrome only. Should not be used for the diagnosis of acute malaria.
87177	Ova and parasites; direct smears, concentration, and identification	Clinicians may order up to 2 additional stool O & P tests for patients with unexplained eosinophilia, persistent abdominal pain, specific known contact with individuals with parasitic diseases and presence of gastrointestinal symptoms or poor growth
87207	Malaria smears (thin and thick); special stain for inclusion bodies or intracellular parasites (may be used for other parasites, e.g. kala azar, leishmania, filaria)	Fevers, eosinophilia, lymphadenopathy, hepatosplenomegaly, or other signs or symptoms of parasitic disease, particularly malaria, in patients from specific, endemic regions
<i>Other infectious diseases</i>		
86588	Streptococcus screen, direct (“Rapid Strep”)	Sore throat, fever, tonsilopharyngeal exudate, or scarletini-form rash
86703	HIV antibody, single assay with confirmatory testing	Risk factors for HIV infection: e.g. children at risk of perinatal or other exposure; or signs, symptoms, or specific historical risk factors suggestive of HIV infection or exposure. All patients tested for HIV must receive appropriate pre- and post-test counseling. Lack of an OF-157 form at the time of the RHAP, or no overseas testing, are not criteria for HIV testing.

<i>Other infectious diseases (cont)</i>		
87081	Streptococcus (throat) culture, bacterial screening for single organisms	Sore throat, fever, tonsilopharyngeal exudate, or scarletiniiform rash
87086	Urine culture, bacterial; quantitative colony count	Dysuria; pyuria; hematuria; urinary retention, urgency, or frequency; flank pain; suprapubic pain; or unexplained fever in young children
87186	Sensitivity studies, antibiotic; microtiter, MIC, any number of antibiotics	For use with positive urine cultures only
<i>Endocrine diseases</i>		
82948	Glucose; blood reagent strip	Glucosuria, history of diabetes mellitus, or signs or symptoms suggestive of diabetes mellitus such as polyuria, polydipsia, weight loss, chronic ulcers, etc...
84443	Thyroid Stimulating Hormone	Signs or symptoms suggestive of thyroid disease, goiter
<i>Cardiovascular diseases</i>		
93000	Electrocardiogram, routine with at least 12 leads, interpretation, and report	Physical signs or symptoms or historical findings suggestive of cardiovascular disease which would require urgent evaluation or treatment if supported by abnormal EKG changes
<i>Other</i>		
81025	Urine pregnancy test, by visual color comparison methods	Signs or symptoms of pregnancy, amenorrhea, oligomenorrhea